



Family Camp Registration Form Memorial Day 2012

May 25-28, 2012

Family Last Name: _____

Family Information (PLEASE PRINT CLEARLY)

Contact Name: _____

Address: _____

City: _____ State _____ Zip: _____

Phone #: (____) _____ Email: _____

FAMILY LIST– please **print** the names of the family members attending. (Please photocopy if more than 8 members)

Please mail this registration form and payment to:

Memorial Day Family Camp
111 YMCA Dr
Ocoee, TN, 37361
Fax: 423-338-5507

Name	Age:	Relation to Family	Years attended
Name called & last name	in Aug	(Relation to contact person: father, daughter, etc.)	# of years person has attended

PRICES

Prices include:

- Program Activities: campfire, swimming, climbing, canoeing, water skiing, banana boat, archery, hiking, arts & crafts and a lot more!! Additional charges for store items and paintball
- Meals: 3 meals on Saturday/Sunday, 2 meals on Monday (**Friday dinner is \$5/person, reservations by Wed. 5pm**)
Please indicate how many are expected for Friday Dinner: _____ # of Vegetarians in Group: _____
- **If you have a cabin preference on the main camp side, please indicate that here (We will do our best to accommodate you, but there are NO guarantees on cabin assignments!):** _____

Main Camp Cabin-
Open air cabins 3
Adults \$125/person

Youth (ages 6-12) \$100
Youth under 6 Free

Johnson Cabins at Wasson-
A/C furnished cabins sleeps 8
1 A/C furnished cabin sleeps 6

Adults \$150/person
Youth (ages 6-12) \$120
Youth under 6 Free

Wasson Lodge (32 max)
7 bedroom 7 bathroom
A/C and furnished

Adults \$150/person
Youth (ages 6-12) \$120
Youth under 6 Free

Tent Camping
Adults \$90/person
Youth (6-12) \$70
Youth under 6 Free

Please check here if you would like to share a cabin with another family:

Name of family _____

Day Guest: \$30/day. How many Day Guests to expect? : _____

PAYMENT TYPE - Payment includes Deposit (Amount: \$ _____) Balance (Amount: \$ _____)

Check (Check #: _____) Make out to "YMCA Camp Ocoee" put "Family Camp" on the memo line

Credit Card - Visa Mastercard Discover Card #: _____
Name on card _____ Expiration date (mm/yy): ____/____

SIGNATURE: _____ **DATE:** _____

A **\$200 deposit** for each family is required with this registration form in order for us to confirm your reservation. Balance is due upon arrival.